

CLAIMS ONLY							Application Number <i>101255825</i>		Filing Date	
							Applicant(s)			
							* May be used for additional claims or amendments			
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*		*	
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Total Indep	<i>2</i>		←		←		Total Indep	←	←	←
Total Depend	<i>61</i>		←		←		Total Depend	←	←	←
Total Claims	<i>63</i>						Total Claims			